

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 712580

FILED
Apr 25, 2005
Secretary of State

Entity Name: 252 JEFFERSON CONDOMINIUM, INC.

Current Principal Place of Business:

252 JEFFERSON AVE APT 3
MIAMI BCH, FL 33139

New Principal Place of Business:

Current Mailing Address:

918 OCEAN DRIVE
207
MIAMI BCH, FL 33139

New Mailing Address:

FEI Number: 59-1235171 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KLETZENBAUER, HERI
918 OCEAN DRIVE
#207
MIAMI, FL 33139 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: _____

Electronic Signature of Registered Agent

_____ Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: TAMCSIN, ROBERT
Address: 252 JEFFERSON AVE. #3
City-St-Zip: MIAMI BEACH, FL 33139

Title: VPD () Delete
Name: MIKKELSEN, CHRISTIAN
Address: 252 JEFFERSON AVENUE #5
City-St-Zip: MIAMI, FL 33139

Title: STD () Delete
Name: GOMEZ, LUISA
Address: 252 JEFFERSON AVE #2
City-St-Zip: MIAMI, FL 33139

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: T () Change (X) Addition
Name: DERRICK, LORI
Address: 252 JEFFERSON AVE # 11
City-St-Zip: MIAMI BEACH, FL 33139

Title: T () Change (X) Addition
Name: MARCUS, ROCHELLE
Address: 2319 EAST 23RD STREET
City-St-Zip: BROOKLYN, NY 11229

Title: D () Change (X) Addition
Name: DE SOUSA, WAGNER
Address: 252 JEFFERSON AVENUE
City-St-Zip: MIAMI BEACH, FL 33139

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: HERIBERT KLETZENBAUER

MGR

04/25/2005

Electronic Signature of Signing Officer or Director

_____ Date